

Board of Directors - Public

SUMMARY REPORT

Meeting Date: 22 May 2024

Agenda Item: 10

Report Title:	Transformation Portfolio Report	
Author(s):	Zoe Sibeko, Head of Programme Management Office	
Accountable Director:	James Drury, Director of Strategy	
Other Meetings presented to or previously agreed at:	Committee/Group:	Finance and Performance Committee
	Date:	09/05/2024
Key Points recommendations to or previously agreed at:	The Finance and Performance Committee accepted the report, however requested further clarification regarding the EPR revenue budget and the use of a quantitative risk management approach within the programme.	

Summary report

The Strategic Transformation programmes and projects reported an improving picture with only one project, Electronic Patient record (EPR) with a red rating.

The Community Mental Health Programme (CMHT) was not discussed at Transformation Board as it has a green rating. Similarly Leaving Fulwood however Board is asked to note:

Leaving Fulwood

Engagement with the representatives of Espresso (the purchaser) and with the Sheffield City Council planning department has confirmed that work is progressing towards the finalisation of the planning application and related documentation. It is anticipated that the Fulwood application will be considered at a planning committee meeting in late June 2024. The outcome of this process will inform the next steps with the sale of Fulwood to Espresso.

The following are key areas of progress and risk were reported to the Transformation Board on 25 April 2024.

Electronic Patient Record Project

The project is reporting **an overall Red rating** which is forecast to improve to amber in May 2024.

The Executive Director of Finance advised that the revised programme plan was approved at Board of Directors on 24 April 2024 which enables the programme to re-set. The planned launch of Tranche 2 is early 2025 and communications will be issued to that effect shortly to allow teams to plan and prepare.

To ensure the success of the programme focus is to be placed on people, this includes both building the programme team and ensuring the staff are prepared for the launch of Tranche 2. Programme Team roles have been identified in the plan and activity is taking place within the next 4 weeks to recruit to these

positions.

To prepare staff it is key that the period from now until go live focuses on building digital literacy, consideration of how services can be digitised to support system specification and configuration and to ensure the required training is received.

The EPR Programme Team will ensure that a Quantative Risk Assessment process is followed which will use data to determine the impact of the risk on timescales and costs. This will be trialled for inclusion in the portfolio risk strategy and any risks included, as required in the Corporate Risk Register.

Therapeutic Environments Programme

The programme reported **an overall amber rating**.

Ligature Anchor Point (LAP) Removal Phase 3

Stanage Ward

Stanage Ward is now operational.

Maple Ward

Procurement advice has been gained from the Procurement Framework used for the Maple Ward improvements and it is now clear that an award of preferred provider status must be made before the 31st May 2024. Due to this, and on the basis that it does not form a legally binding contract for the delivery of the construction work and that there are no penalties if SHSC subsequently are unable to commit to a construction contract, the project team are to complete the award for the preferred supplier. Once awarded in May, if the trust chooses to proceed this will be in line with the planned timescales of commencing the work in late November for completion in June 2025.

To enable Maple Ward to decant in preparation for the works the following moves will take place:

- On 23rd May Dovedale 2 ward will move to Burbage ward
- By 21st June construction work will be complete on Dovedale 2
- Date is to be confirmed however it is anticipated that by the end of June Maple Ward will relocate to Dovedale 2.

The decant of staff and service users from Maple Ward to Dovedale 2 is the final step to meet a requirement from the CQC Well Led Inspection in 2021 regarding the need for care to be provided in estates that are suitable, clean, safe, private and dignified. Thereby closing the associated patient safety risks on our acute wards.

Primary and Community Mental Health Transformation Programme (PCMHT)

The Programme reported **an overall Green rating**.

Go-live will commence with integration week on 29th April, in preparation for this:

- The communications plan to support launch has been refreshed and shared with the Programme Board for assurance.
- The Programme Team are ensuring that rota's and estates plans are finalised to support staff.
- The caseload and patient transfer protocol has been agreed and patient letters have been issued to inform of any changes.
- As this is a time of intense change, staff are being asked to speak up about any uncertainties they have and to understand that issues will be encountered but will be overcome if teams continue to work together.
- Services which may interface with the PCN's are being asked to note that there may be delays in responsiveness as the changes are embedded and to be compassionate as staff adopt new ways of

working.

From a programme perspective resources are continuing to be shown with an amber RAG rating due to staff managing business and usual and programme tasks. Risk scores are decreasing and no new risks have been raised.

The Board agreed that the programme has made impressive progress during the last two months and is truly transformational.

Learning Disabilities Programme

The programme reported an **overall Green rating** at the conclusion of the design phase. As the programme moves into implementation phase a new Senior Responsible Officer (SRO) Interim Medical Director Helen Crimlisk, is taking the opportunity to look closely at the plan and to review risks to delivery. The Portfolio Board noted risks in relation to workforce, leadership and OD, and operational implementation of the agreed model.

The SRO will ensure that appropriate assurance is provided by the Programme Board to the Transformation Portfolio Board and committees.

Summary of Risks

The key risks currently being mitigated which remain the same from March 2024 are:

1. The continued use of Insight leaving existing sub-optimal arrangements for reporting of patient safety risks until RiO is implemented in these services.
2. Delay to delivery of improvements to inpatient ward environments which will enable the movement of service users from Maple Ward, thereby reducing their exposure to fixed ligature anchor points.

The risks reported in March 2024 which are now closed are:

3. The staffing split of SPA / EWS between the PCN's and SHSC may result in potential risk of the new Urgent and Crisis service being unable to operate due to a lack of posts.
4. The EWS staff consultation is being reviewed which may impact on timescales in both the CMHT and PCMHT programmes.
5. Stakeholder engagement in primary care requires ongoing support. This needs to be balanced with managing relationships across the whole system.

Appendices attached:

Appendix 1 Transformation health card

Appendix 2 Finance health card

Recommendation for the Board/Committee to consider:

Consider for Action		Approval		Assurance	X	Information	X
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Recommendation: The Board is asked to note the progress of the Trust's transformation portfolio.

Please identify which strategic priorities will be impacted by this report:

Effective Use of Resources	Yes		No	✓
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Deliver Outstanding Care				Yes	✓	No	
Great Place to Work				Yes	✓	No	
Ensuring our services are inclusive				Yes	✓	No	
Is this report relevant to compliance with any key standards? State specific standard							
Care Quality Commission Fundamental Standards	Yes	✓	No		Environmental standards – LAPs, privacy and dignity, least restrictive environments		
Data Security and Protection Toolkit	Yes	✓	No		All standards within the Data Protection Security toolkit, which has replaced the IG Governance toolkit are relevant to the Electronic Patient Record system		
Any other specific standard?			✓				
Have these areas been considered? YES/NO							
				If yes, what are the implications or the impact? If no, please explain why			
Service User and Carer Safety, Engagement and Experience	Yes	✓	No		Service user and carer safety and experience is a key consideration within all programmes within the portfolio.		
Financial (revenue & capital)	Yes	✓	No		Finance is a core component of all programmes within the portfolio.		
Organisational Development /Workforce	Yes	✓	No		OD and workforce considerations are key to agreeing the scope, delivery and impact of all programmes within the portfolio.		
Equality, Diversity & Inclusion	Yes	✓	No		QEIA is undertaken as part of each programme and informs the programme structure, stakeholder engagement and outcomes.		
Environmental Sustainability	Yes	✓	No		Sustainability is considered within all programmes and projects		

TRANSFORMATION BOARD FINANCIAL DASHBOARD SUMMARY:

M12 March

Programme	Sub-schemes	Capital	Capital	Revenue	
		YTD	Forecast	YTD	Forecast
Leaving Fulwood	Demolition costs - Fulwood. The scheme has been removed from the capital programme.	N/A	N/A	N/A	N/A
	Fulwood site & the new HQ	N/A	N/A		
Community Mental Health Transformation Programme	To be monitored in 2024/25.	N/A	N/A	-	-
Primary & Community Mental Health Programme	To be monitored in 2024/25.	N/A	N/A	-	-
Therapeutic Environments Programme	New adult acute inpatient & older adults developments			N/A	N/A
	Ligature anchor point removal project - phase 3 Stanage			N/A	N/A
	Ligature anchor point removal project - phase 3 Maple			N/A	N/A
	Ligature anchor point removal project - phase 3 Dovedale 1			N/A	N/A
	Health Based Place of Safety			N/A	N/A
	Project team				
EPR					
Learning Disability Programme	Approval received to progress with phase 1 of the programme. No capital costs anticipated and Phase 1 revenue costs are expected to be contained within existing resources. To be monitored in 2024/25.	N/A	N/A	-	-
Clinical & Social Care Strategy	Experts by experience	N/A	N/A		
Community Facilities Programme	Fitzwilliam & Sydney St	Programme closed			

RAG Rating definitions:

Green – On track

Amber – (i) Under or overspent for 1-2 months with no recovery plan, or (ii) recovery plan in place but cost pressures remain

Red – (i) Under or overspent for over 2 months with no recovery plan and impacts on delivery of capital plan, or (ii) significant affordability concerns for the 24/25 capital or revenue plan

CAPITAL (£'000)									
Programme	Sub-schemes	Revised Plan	23/24 Actual	Underspend/ (overspend)	Finance lead	OVERALL RAG rating	Previous month RAG	Comments	2024-25 draft budget
Leaving Fulwood	Demolition costs - Fulwood	-	-	-	Dave Spooner			The scheme has been removed from the capital programme.	-
Therapeutic Environments Programme	New adult acute inpatient & older adults developments	-	-	-	Dave Spooner			Official confirmation received that our bid from September 2021 for new hospital programme funding has not been successful. The programme will consider options for taking this project forward.	N/A
	Ligature anchor point removal project - phase 3 Stanage	2,679	2,584	95	Dave Spooner			The project completed in March with an underspend of £95k compared to the forecast underspend of £24k at M11. This has reduced, however, compared to earlier expectations as a result of the additional works required to resolve the water pressure issue.	N/A
	Ligature anchor point removal project - phase 3 Maple	250	197	53	Dave Spooner			The tender process is underway and costs are in excess of the £3.6m planned over 23/24 & 24/25 but less than the previous expectation of £8.7m at the design stage. Spend this year includes £0.2m for the design work. The RAG rating remains until Board approval to proceed is confirmed.	3,100
	Ligature anchor point removal project - phase 3 Dovedale 1	30	-	30	Dave Spooner			The work on the project has been delayed to help manage the capital programme now that the Fulwood receipt is not expected until 2024/25.	0
	Health based place of safety (HBPoS)	1,512	1,505	7	Dave Spooner			The HBPoS costs have increased from previous reporting due to spend on video walls and other changes identified in January. This is being managed within the overall capital programme.	N/A
	Therapeutic Environments Programme	-	200	(200)	Dave Spooner			The pay costs of the Therapeutic Environments Programme team have been transferred to capital in M11 as the work they do is directly linked to bringing assets into use. This transfer is manageable within the revised capital programme funding that became available in recent weeks.	N/A
EPR		2,850	3,847	(997)				The forecast position increased significantly in M11. This is due to clarification of the costs required to continue with the EPR programme in February and March following a review by the project leadership team. In addition, £0.5m of digital team revenue costs were transferred to capital following the review as it was identified that a number of the digital team have been working on EPR but the costs have been recognised in other digital cost centres. This transfer is manageable within the revised capital programme funding that became available in recent weeks.	3,293
Community Facilities Programme	Fitzwilliam & Sydney St	Programme closed							

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Dave Spooner - Capital Accountant
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REVENUE (£'000)									
Programme	Sub-schemes	23/24 Plan	23/24 Actual	Underspend/ (overspend)	Finance lead	RAG rating	Previous month RAG	Comments	2024-25 draft budget
Leaving Fulwood	Fulwood site & new HQ	820	895	(75)	Paul Isingoma			The delay to the sale of Fulwood has led to significant unplanned costs including security and council rates. The overspend is after a contribution of £120k for security costs..	706
Community Mental Health Transformation Programme	TBC			-	Kaitlin Plant			Revenue costs are expected to be within existing operational budgets plus the full year effect of SYICB confirmed MHIS funding.	TBC
Primary & Community Mental Health Programme	TBC			-	Nicola Hume			The clinical model and budget scope is to be determined. Revenue costs are currently expected to be within existing operational service budgets.	TBC
Therapeutic Environments Programme		241	3	238	Jill Savoury			The pay costs of the team have been transferred to capital.	223
EPR		1,007	1,576	(569)	Lydia Sedor			Revenue costs remain in line with previous expectations. This is despite capital costs increasing by £0.5m following a transfer of revenue costs in M11. These costs were taken from other digital cost centres following a review by the Digital leadership team of the work being undertaken by all digital staff.	1,030
Learning Disability Programme				-	Paul Isingoma	N/A	N/A	Approval has been given for phase 1 of the new LD model to be implemented. Budgets will be contained within the existing funding. Future dashboards will include reporting against the budget.	5,111
Clinical & Social Care Strategy		17	6	11	Nicola Hume			Following further review, it has become clear that the staff member previously charged to this project is part of the PMO and works on other projects too. As a result, her costs are now treated in the same way as other PMO costs and not allocated specifically to the project. Experts By Experience budget set at £17k with minimal costs of £1,387 recognised in the year to date.	17

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Contacts:

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